PTO/SB/22 (12-04)
Approved for use through 7/31/2006. OMB 0651-0031
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Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

PETIT	ION FOR EXTENS	ION OF TIME UNDER 3	Docket Number (Optional)									
		FY 2005	SON-2855									
		olidated Appropriations Act,										
Applic	ation Number	10/533,946-Conf.	Filed	d May 4, 2005								
For LIGHT ILLUMINATING APPARATUS												
Art Un	it 2872		Examiner	Huy Mai								
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.												
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):												
			<u>Fee</u>	Small Entity Fee								
	One month (3	7 CFR 1.17(a)(1))	\$120	\$60	\$							
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$							
	X Three months (37 CFR 1.17(a)(3)) \$1020 Four months (37 CFR 1.17(a)(4)) \$1590			\$510	\$ 1,020.00							
				\$795	\$							
	Five months (37 CFR 1.17(a)(5))	\$1080	\$								
Applicant claims small entity status. See 37 CFR 1.27.												
A check in the amount of the fee is enclosed.												
	Payment by credit card. Form PTO-2038 is attached.											
	•	ready been authorized to d		application to a Depo	sit Account.							
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ت	Deposit Account No	eby authorized to charge a umber 18-0013		osed a duplicate cop								
	·			·								
1.0	m the ann											
ı a	~~PP	licant/inventor.										
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).												
attorney or agent of record. Registration Number												
	x atto	rney or agent under 37 CF										
Registration number if acting under 37 CFR 1.34				24,104	·							
_			August 14, 2006									
		Signature	Date									
_		Ronald P. Kananen	(202) 955-3750									
	// 1	yped or printed name	Telepho	one Number								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.												
	Total of	1 forms are submit	tted.									

KILE 3

IAP15 Rec'd PCT/PTO 14 AUG-28

PTO/SB/17 (01-06)
Approved for use through 7/31/2006. OMB 0651-0032
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Under the Par	erwork Reduction Act of	1995, no person are	required to	respond to a collectio				control number.				
Fees pursuant to t	he Consolidated Appro	Complete if Known										
FEE	TRANS	7 ipplication remise:		10/533,946-Conf. #9625								
	For FY 2	Filing Date		May 4, 2005								
	First Named Inv Examiner Name	011101	luy Mai	nivn								
Applicant	claims small antity ata	2072										
Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 1,020.00			Art Unit									
TOTAL AMOU	NT OF PAYMENT	Attorney Docket No. SON-2855										
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
X Deposit Ac	x Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC											
For the	above-identified dep	osit account, the	Director is	s hereby authorize	ed to: (chec	k all that apply)						
X CI	narge fee(s) indicate	d below		Charg	e fee(s) ind	icated below, ex	cept for t	he filing fee				
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17												
FEE CALCUL	ATION (All the f	ees below are	due upo	n filing or may	be subje	ct to a surcha	rge.)					
1. BASIC FILIN	G, SEARCH, AND E											
	F	ILING FEES Small Entity		ARCH FEES Small Entity	EXAMIN	ATION FEES Small Entity						
Application Ty	/pe Fee (Fee (\$		Fee (\$)	Fee (\$)	Fees	Paid (\$)				
Utility	300	150	500	250	200	100						
Design	200	100	100	50	130	65						
Plant	200	100	300	150	160	80						
Reissue	300		500	250	600	300						
Provisional	200	100	0	0	0	Ó	·					
2. EXCESS CLA	AIM FEES						Eng (#)	Small Entity Fee (\$)				
Fee Description	r 20 (including Reis	sues)					<u>Fee (\$)</u> 50	25				
Each independe			200	100								
Multiple depend				•			360	180				
Total Claims	Extra Claims	Paid (\$)	Mı	ıltiple Depende	nt Claims	i						
	- 20 =		Fe	e (\$) F	ee Paid (<u>\$)</u>						
HP = highest num	ber of total claims paid fo	or, if greater than 20.				<u> </u>		_				
Indep. Claims Extra Claims Fee (\$)			Fee	Paid (\$)								
HP = highest num	- 3 = ber of independent claim	s paid for if greater t		. .								
3. APPLICATIO	·	e para rer, il greater t										
If the specifica	tion and drawings	exceed 100 sheets	of paper	(excluding elect	onically fil	ed sequence or	computer					
listings und	ler 37 CFR 1.52(e))	, the application s	size fee di	ue is \$250 (\$125)	for small er	ntity) for each ac	dditional 5	60				
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 (round up to a whole number) x =												
4. OTHER FEE	100 = (S)		·	_ (round up to a who	ole Hulfiber)	^ '	Face	Paid (\$)				
1	•	30 fee (no small e	entity disc	count)			1,000					
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,020.00												
SUBMITTED BY												
Signature	1/1			Registration No. (Attorney/Agent)	24,104	Telephone	(202) 95	55-3750				
Name (Print/Type) Ronald P Kanango							Date August 14, 2006					
	/ //	<u> </u>				_l	3					